

feeble, exhibited a lower temperature, not exceeding in many instances  $75^{\circ}$ , or even descending as low as  $71.5^{\circ}$ . The skin covering the muscular portion of the body is warmer than that over the bones and tendons. Contraction of the muscles caused the temperature of the superjacent portion of skin to rise one degree or more. The decrease of temperature from the skin to the outer covering in a room at a temperature of  $63^{\circ}$  was as follows: on the skin  $88^{\circ}$ , on the linen shirt  $82^{\circ}$ , on the vest  $75^{\circ}$ , and on the coat  $72^{\circ}$ . The highest temperature was found to occur in men in the full vigour of life. As a singular fact, Dr. Kunkel states that children otherwise in perfect health showed a much lower degree of surface temperature—from  $77^{\circ}$  to  $84^{\circ}$ —than adults. He does not appear to have followed out Professor Lombard's observations on the temperature of the head.

### THE QUEEN'S JUBILEE.

ON the 16th inst. the Queen held a Court at Windsor Castle, at which, amongst others, addresses were presented by deputations from the University of Edinburgh and the University of London. The deputation from the former body consisted of Principal Sir William Muir, K.C.S.I.; Professor Campbell Fraser; Mr. T. Graham Murray; Dr. P. Heron Watson; the Right Hon. the Lord Advocate, C.B., M.P.; Sir Dyce Duckworth; Professor Sir William Turner; Professor Grainger Stewart; Professor Armstrong; and Mr. Taylor Innes. Sir William Muir, Professor Campbell Fraser, and Professor Sir William Turner had the honour of kissing hands. The University of London was represented by Earl Granville, K.G., Chancellor; Sir James Paget; Dr. Wood; Sir John Lubbock, M.P.; Sir William Gull; Dr. Quain; Dr. Weymouth; Dr. Baines; Mr. Osler; and Mr. Arthur Milman, Registrar. Earl Granville, Sir James Paget, and Dr. Wood had the honour of kissing hands.

### GUY'S HOSPITAL.

THE *Graphic*, in its issue for the 14th inst., publishes a descriptive account of Guy's Hospital. The article, which is profusely illustrated, commences with a brief sketch of Thomas Guy, the founder of the charity, and traces the progress of the institution down to the present time. The illustrations are, on the whole, judiciously chosen, and comprise, amongst others, portraits of Guy and Hunt, the chief entrance, the chief clinical, Mary, and Dorcas wards, the founder's tomb, the old staircase, and the women's surgery, this last named indicating a tendency towards realism in art which we trust will not be allowed to go to such lengths as to rival the "pictures of horrors" of the Paris Salon. The publication of this brief history of the charity, and its labours by our contemporary cannot fail to attract support to the hospital in its attempt to retrieve its failing fortune.

### PYO-PNEUMOTHORAX SUBPHRENICUS.

THE condition simulating very closely a pneumothorax of the right side, but which is due to an abscess between the liver and diaphragm, was first thoroughly described and differentiated by Professor Leyden. A record of such a case has just been made by Dr. Pusinelli of Dresden (*Berl. Klin. Woch.*, No. 20), who points out that the condition is mostly due to perforation of a gastric or intestinal ulcer, and that the diagnosis depends upon the occurrence of abdominal symptoms at the onset, the absence or complete suppression of pulmonary symptoms, the sharp transition from normal vesicular breathing at the apex of the lung displaced upwards by the diaphragm to amphoric breathing on deep inspiration, and the absence of hepatic dulness with marked displacement of the liver downwards. If the diagnosis be correctly made, it is urged that treatment might be directed

to abdominal section, the discovery of the ulcer, and its excision. Duodenal ulcers, as the case he details shows, often run their course without symptoms, and may be so little adherent that a slight injury, as a fall on the abdomen, may detach them and cause perforation.

### BAD DRAINAGE AND LANDLORDS' LIABILITIES.

BOTH in England and in Scotland it is being made clear to landlords that they will be held responsible for letting houses the drainage of which is in such a state as to induce injury to health amongst the tenants. The letting of a house for human occupation should necessarily imply that the house is held to be fit for occupation, and substantial penalty should be required of a landlord who fails to fulfil his part of the contract. In the case of *Gurney v. Stroud*, tried the other day before Mr. Justice Cave and a common jury, the judge informed the jury that if a house was let furnished, then there was an implied contract by the landlord that it was fit for habitation, and the tenant having shown that soon after he came into possession his wife and children became ill, two of the latter dying, he was awarded compensation to the extent of £175. And in a somewhat similar case which came before Mr. Sheriff Lees at Glasgow, £150 was awarded to a parent as compensation for the loss of a child eight years of age, and for illness in other members of his family, owing to the defective drainage of the house which he occupied.

### PERFORATING ULCERS OF THE AORTIC VALVES.

FOR a few years past much attention has been given to the cardiac complications of tabes dorsalis, and every kind of view has been stated as to the possible connexion between the heart lesion and the spinal degeneration. Before the Société Nationale de Médecine de Lyon, M. Teissier exhibited a series of photographs designed to indicate the dimensions and nature of the perforations of the aortic valves observed in ataxic patients. These perforations are accompanied by an extreme thinning of the valve, such as is not met with either in atheroma or syphilis. M. Teissier considers it to be a genuine trophic change, a veritable perforating ulcer of the valves. Moreover, these lesions are found in conjunction with visceral perforations, also attributed to the tabetic influence—e.g., perforation of the trachea and of the œsophagus. In one of his cases of valvular perforation, M. Teissier observed an intestinal perforation the size of a franc piece. The holes in the aortic valves give rise eventually to all the signs of aortic regurgitation.

### LIFE INSURANCE.

A CASE recently decided in the Court of Chancery may serve as a warning to any who purpose insuring their lives, and also as a caution to medical examiners. The defendant was alleged to have made a misstatement in having denied that he ever had rheumatism or heart disease, from both of which conditions he had suffered some years previously, and he consequently forfeited his policy and the premiums already paid by him. We do not now enter into the question as to how far a history of rheumatism or its cardiac effects ought to influence the acceptance of a life. Every case must be judged upon its own merits, though undoubtedly a rheumatic taint must often constitute a grave disqualification, notwithstanding the fact that since the introduction within recent years of improved methods of treatment, the dreaded cardiac complication is a less real danger than formerly. It is possible that the full meaning of the perversion of facts may not have been apparent to the offender, but the misstatement could not be condoned on that account. This kind of offence, though perhaps not common, might be illustrated